



Exclusive Breastfeeding Behavior Analysis Based on Health Belief Model: A Cross-Sectional Study

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ARTICLE INFO

Article history:

Received 11 March 2021

Accepted 21 June 2022

Published 10 July 2022

Keyword:

Health Belief Model
Exclusive Breastfeeding
Perception

ABSTRACT

Margorejo District is the sub-district with the lowest exclusive breastfeeding coverage in Pati District in 2020 at 10.4%. One of the reasons for the failure of exclusive breastfeeding in the Margorejo Subdistrict is the advertisement of formula milk to provide formula milk, the mother's belief that her baby will remain healthy even though she is not given exclusive breastfeeding, and the mother's assumption that exclusive breastfeeding is not a natural family planning method. This study aims to analyze the factors that influence exclusive breastfeeding behavior based on the Health Belief Model. Analytical design with a cross-sectional study design with a quantitative approach accompanied by a qualitative approach as support (mixed method). The sample-set was 102 mothers using systematic random sampling. Quantitative data were analyzed using the chi-square test and logistic regression. Qualitative data are presented in the form of a narrative. The variables in this study related to exclusive breastfeeding behavior in the Margorejo sub-district were perceptions of vulnerability p-value 0.008, perceived seriousness p-value 0.000, perceived benefits p-value 0.001, perceived barriers p-value 0.000, and cues to action p-value 0.000 ($p < 0.05$). Variables that have a joint relationship with exclusive breastfeeding behavior are perceived seriousness p-value 0.004, perceived barriers p-value 0.006, and cues to action p-value 0.024.

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Kata kunci:

Health Belief Model
Exclusive Breastfeeding
Perception

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DOI: 10.30604/jika.v7iS1.1115

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ABSTRAK

Kecamatan Margorejo merupakan kecamatan dengan cakupan ASI Eksklusif terendah di Kabupaten Pati tahun 2020 sebesar 10.4%. Kegagalan ASI Eksklusif di Kecamatan Margorejo salah satunya yaitu disebabkan karena iklan susu formula untuk memberikan susu formula, keyakinan ibu bahwa bayinya akan tetap sehat walaupun tidak diberikan ASI Eksklusif, dan anggapan ibu mengenai bahwa ASI Eksklusif bukan merupakan KB alami. Penelitian ini bertujuan untuk menganalisis faktor yang berpengaruh terhadap perilaku pemberian ASI Eksklusif berdasarkan Health Belief Model. Desain analitik dengan rancangan cross-sectional study dengan pendekatan kuantitatif yang disertai dengan pendekatan kualitatif sebagai pendukung (mixed method). Sampel yang ditetapkan sebanyak 102 ibu menggunakan systematic random sampling. Data kuantitatif dianalisis menggunakan uji chi - square dan regresi logistik. Data kualitatif disajikan dalam bentuk narasi. Variabel dalam penelitian ini yang berhubungan dengan perilaku pemberian ASI eksklusif di Kecamatan Margorejo adalah persepsi kerentanan p-value 0.008, persepsi keseriusan p-value 0.000, persepsi manfaat p-value 0.001, persepsi hambatan p-value 0.000, dan cues to action p-value 0.000 ($p < 0.05$). Variabel yang memiliki hubungan bersama dengan perilaku pemberian ASI eksklusif adalah persepsi keseriusan p-value 0.004, hambatan persepsi p-value 0.006, dan cues to action nilai p-value 0.024.

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INTRODUCTION

The Infant Mortality Rate (IMR) is the main indicator of a country in improving the quality of human health because it can describe the health of the population in general. Infant Mortality Rate (IMR) is the number of babies who die at the age of 0 years out of 1,000 live births each year, or it can be said as the probability of babies dying before reaching the age of 1 year per 1000 live births. (Carolina et al., 2019). It is estimated that every year as many as 136 million babies are born, but 4 million of them die at the age of 0-29 days, and 99% of these infant deaths occur in developing countries. The biggest causes of infant mortality in Indonesia are disorders that often occur in the perinatal period, congenital and genetic disorders, pneumonia, diarrhea, and malnutrition. Prevention of diarrhea and malnutrition in infants to reduce the Infant Mortality Rate (IMR) can be done through exclusive breastfeeding. (Angraini, 2019)

Breast milk is the best food for babies because it contains many nutrients for the baby's growth and development. Early breastfeeding is very important, especially at the age of 0 to 6 months, it must be given to babies. Breast milk is useful for increasing the body's immune system, reducing the risk of diarrhea, bronchitis, inflammation of the ears, and urinary tract diseases, and breastfeeding can facilitate the production of growth hormone which is useful in building a close bond between mother and baby. (Jauhari et al., 2018)

The achievement of the Exclusive Breastfeeding program in Central Java Province in 2019 was 66%. (Dinas Kesehatan Provinsi Jawa Tengah, 2019) Pati Regency is a district located in Central Java Province and has the highest 5 (five) exclusive breastfeeding achievements in 2019, which is 79.8%, but there is still one sub-district whose exclusive breastfeeding program achievements are still below the standard, namely Margorejo District. In 2019 the achievement of the Exclusive Breastfeeding program in Margorejo District was only 24.9% and in 2020 it decreased to 10.4%, while the target for achieving exclusive breastfeeding was 50%. (DKK Pati, 2019)

One of the reasons for the low achievement of exclusive breastfeeding according to research by Endang S. Sulaeman, Bhisma Murti, Haris Setyawan, and Sevia Rinawati in 2018 is caused behavioral factors of breastfeeding mothers. (Sulaeman et al., 2018) Health Belief Model (HBM) is a behavioral theory that is most widely used in health research it has demographic components, perceived susceptibility (perceived susceptibility), perceived severity (perceived seriousness), perceived benefits (perceived benefits), perceived barriers (perceived barriers), and cues to action (instructions for Act).

From the results of a preliminary study conducted in Margorejo District on breastfeeding mothers and health promotion officers regarding exclusive breastfeeding, it shows that breastfeeding mothers already know that exclusive breastfeeding should be given to infants aged 0 to 6 months without providing other food/liquids. One of the reasons for the failure of exclusive breastfeeding in the Margorejo sub-district is the advertisement of formula milk so that mothers are interested in giving formula milk, the mother's belief that her baby will remain healthy even though she is not given exclusive breastfeeding, and the mother's assumption that exclusive breastfeeding does not provide benefits.

Concerning exclusive breastfeeding, a mother's belief is an understanding of exclusive breastfeeding information that can influence the mother's decision to give exclusive

breastfeeding to her baby. If breastfeeding mothers have a strong perception of exclusive breastfeeding, it is possible to do exclusive breastfeeding. (Tefa et al., 2021) The purpose of this study is to analyze the mother's perception of exclusive breastfeeding behavior based on the theory of the health belief model.

METHOD

This study uses an observational using cross-sectional study design with a quantitative approach accompanied by a qualitative approach as support (mixed method). The place of research was conducted in Margorejo District, Pati Regency, which was conducted in October 2021, while the population in this study were all mothers who had babies aged 7-12 months, totaling 344 people in 18 villages in Margorejo District. The sample is mothers who have babies aged 7-12 months totaling 102 people.

The quantitative method was carried out first by distributing questionnaires to 102 breastfeeding mothers in the Margorejo District, which previously had tested the validity and reliability of the questionnaire to determine the feasibility of the question points. After that, the researchers conducted qualitative interviews with breastfeeding mothers who did not give exclusive breastfeeding to their babies. Interviews were conducted on mothers with almost the same characteristics.

Data analysis includes three stages. First, the univariate analysis aims to obtain a description of each variable studied and will be presented in the form of a frequency distribution. Then, a bivariate analysis was carried out to determine the relationship between the independent and dependent variables using the Chi-square test with a 2x2 table, and finally, a multivariate analysis was carried out to determine the strength of the relationship between the independent and dependent variables using the logistic regression test. The program used to process the data in SPSS version 16. The cut of point used in the research is the media because the data is not normally distributed.

RESULTS

The results showed that the mother's level of perception of vulnerability was low with a value of 67.6%. The mother's level of perception of seriousness is low with a value of 64.7%. The level of the mother's perception of benefits is low with a value of 58.8%. The mother's level of perception of barriers is high with a value of 60.8%. The mother's cues to action level are low with a value of 62.7%, and for not exclusive breastfeeding behavior it has a greater value of 64.7%. The details are presented in table 1.

The results of the study in table 1 illustrate that mothers in Margorejo District who have a perception of vulnerability as many as 69 people (67.6%), 66 people (64.7%) have a perception of less seriousness, 60 people (58.8%) have a perception of less few benefits. less, 62 people (60.8%) had a perception of high barriers, 64 people (62.7%) dared to act (cue to act) in the less category, and 66 people (64.7%) did not do exclusive breastfeeding. Furthermore, the relationship of 5 variables with exclusive breastfeeding behavior is presented in table 2.

Table 1
Margorejo Distribution of Perceived Vulnerability, Perception of Seriousness, Perception of Benefits, Perception of Barriers and Cues to Action for Breastfeeding Mothers in Margorejo District (N=102)

Perception of Vulnerability	Total	Percent (%)
Poor	69	67.6
Good	33	32.4
Perception of Seriousness		
Poor	66	64.7
Good	36	35.3
Perception of Benefits		
Poor	60	58.8
Good	42	41.2
Perception of Barriers		
Hight	62	60.8
Low	40	39.2
Cues to Action		
Poor	64	62.7
Good	38	37.3
Exclusive breastfeeding behavior		
Not exclusive breastfeeding	66	64.7
Exclusive breastfeeding	36	35.3

Table 2 shows that mothers have susceptibility to exclusive breastfeeding 55 people (79.7%), while mothers have a good vulnerability who do not give exclusive breastfeeding 11 people (33.3%), statistical test results obtained p-value of 0.008, it can be interpreted that there is a relationship the vulnerability of mothers with exclusive breastfeeding behavior in Margorejo sub-district, with a prevalence ratio of 2.391, which means that mothers who have a perception of vulnerability do not have a risk of exclusive breastfeeding of 2.391 compared to mothers who have good perceptions. From the results of interviews with

key informants on 5 mothers who did not give exclusive breastfeeding, it showed that 3 mothers said that children who were not given exclusive breastfeeding were not necessarily susceptible to disease, depending on the child's immune system and mothers who did not give exclusive breastfeeding did not feel vulnerable. Against breast cancer because they rarely suffer from breast cancer even though they do not give exclusive breastfeeding. Furthermore, for the results of the logistic regression analysis the four variables are presented in table 3 below.

Table 2
Relationship of Mother's Vulnerability Perceptions Regarding Diseases That Arise As a result of not doing Exclusive Breastfeeding with Exclusive Breastfeeding Behavior

Research variable	Exclusive Breastfeeding Behavior				Total		p-value	RP & CI
	Not Exclusive		Exclusive		N	%		
	n	%	n	%				
Perception of Vulnerability								
Poor	55	79.7	14	20.3	69	100	0.008	2.391 1.455- 3.931
Good	11	33.3	22	66.7	33	100		
Total	66	64.7	36	35.3	102	100		
Perception of Seriousness								
Poor	54	81.8	12	18.2	66	100	0.000	2.455 1.525- 3.950
Good	12	33.3	24	66.7	36	100		
Total	66	64.7	36	35.3	102	100		
Perception of Benefits								
Poor	49	81.7	11	18.3	60	100	0.001	2.018 1.372- 2.968
Good	17	40.5	25	59.5	42	100		
Total	66	64.7	36	35.3	102	100		
Perception of Barriers								
Hight	53	85.5	9	14.5	62	100	0.000	2.630 1.663- 4.159
Low	13	32.5	27	67.5	40	100		
Total	66	64.7	36	35.3	102	100		
Cues to Action								
Poor	52	81.2	12	18.8	64	100	0.000	2.205 1.431-3.399
Good	14	36.8	24	63.2	38	100		
Total	66	64.7	36	35.3	102	100		

The 54 people (81.8%) showed that they had less seriousness perception and did not give exclusive breastfeeding, while the mothers perceived seriousness was good but did not give exclusive breastfeeding by 12 people (33.3%). The statistical test showed a p-value 0.000 which means that there is a relationship between the perception of a mother's seriousness with exclusive breastfeeding behavior in Margorejo District with a prevalence ratio of 2.455 which means that mothers who have a perception of seriousness have less risk of not exclusive breastfeeding of 2.455 from mothers who have a good perception of seriousness. Based on interviews conducted with 5 mothers, 4 people said that malnutrition did not affect the child's immune system. And mentions that lack of nutrition does not necessarily make children sick easily. On the other hand, 2 people stated that malnutrition could not affect children's intelligence. 49

people (81.7%) had a perception of less benefit and did not give exclusive breastfeeding, and 17 people (40.5%) had a good perception of benefits but did not give exclusive breastfeeding. The statistical test showed a p-value 0.001 which means that there is a relationship between perceived benefits of mothers and exclusive breastfeeding behavior in Margorejo District with a prevalence ratio of 2.018 which means that mothers who have a perception of benefits have less risk of not giving exclusive breastfeeding, which is 2.018, which is greater than mothers who have a good perception of benefits. In the results of interviews conducted with 5 mothers, 3 people stated that they did not believe that breast milk could be useful as a natural family planning program and could maintain pregnancy distance because from the first to the last child did not give exclusive breastfeeding.

Table 3
Result of Logistic Regression Analysis Benefit perception and cues to action with exclusive breastfeeding behavior

Variabel Penelitian	B	Wald	Sig	Exp (B)	CI
Perception of Seriousness	1.869	8.116	0.004	6.481	1.792-23.446
Cues to Action	1.399	5.074	0.024	4.053	1.199-13.694
Perception of Barriers	1.684	7.637	0.006	5.388	1.632-17.791
Constan	-3.039	28.820	0.000	0.048	

A total of 53 people (85.5%) had a perception of high barriers and did not give exclusive breastfeeding, while 13 people (32.5%) had a perception of low barriers but did not give exclusive breastfeeding, the statistical test results showed a p-value of 0.000 which means that there is a relationship between perceptions of maternal barriers and behavior Exclusive breastfeeding in Margorejo District with a prevalence ratio of 2,630 means that mothers who have a high perception of barriers have a risk of not giving exclusive breastfeeding which is 2,630 greater than mothers who have a low perception of barriers. Interviews conducted on 5 mothers said that cracked breasts were a mother's obstacle in breastfeeding, and the lack of milk production made the mother worried that she could not give milk to her child.

A total of 52 mothers (81.2%) had fewer cues to action and did not give exclusive breastfeeding, while 14 people (36.8%) had signs to act well but did not give exclusive breastfeeding. The results of statistical tests showed a p-value of 0.000 which means that there is a relationship between cues to act by mothers and exclusive breastfeeding behavior in Margorejo District with a prevalence ratio of 2.205, which means that mothers who have cues to act have less risk of not giving exclusive breastfeeding, which is 2.205, which is greater than mothers who have a cue to act well. Based on information from 5 mothers, 3 of them stated that the counseling and supervision carried out by health workers at the puskesmas was not optimal.

Based on table 3 of the multivariate analysis, the variables that influence exclusive breastfeeding behavior include the perception of seriousness with sig. 0.004, cues to action sig. of 0.024, and the perception of resistance sig. 0.006. Perceptions of seriousness have the largest exp B, which is 6.481, meaning that mothers with perceptions of seriousness are less at risk of not giving exclusive breastfeeding, which is 6.481 times greater than those with signs to act well.

DISCUSSION

Relationship of Mother's Vulnerability Perception with Exclusive Breastfeeding Behavior

From the research, it was found that the number of mothers who did not give exclusive breastfeeding with a perception of vulnerability was greater than that of mothers who had a good perception of vulnerability. Statistically, this variable has a p-value of 0.008, which means that there is a relationship between perceptions of maternal vulnerability and exclusive breastfeeding behavior. The low perception of a person's vulnerability can be caused by a person's lack of knowledge originating from demographic factors based on the Theory Health Belief Model. (Hayden, 2019) In addition to knowledge based on the findings of the perception of maternal vulnerability, it is obtained from the observations and experiences of mothers on the impact of diseases that arise from not breastfeeding regularly exclusive.

According to Aulia Nimas Rahajeng (2021), if the respondent with the perception of vulnerability is less and does not have an exclusive breastfeeding plan, it shows a significant relationship between the perception of vulnerability and the behavior of exclusive breastfeeding. (Aulia Nimas Rahajeng, 2021) Interviews with 5 mothers, 3 people stated that children who are not given exclusive breastfeeding are not necessarily susceptible to disease, depending on the child's immune system. Mothers who do not give exclusive breastfeeding also do not feel vulnerable to breast cancer because they rarely suffer from breast cancer even though they do not do exclusive breastfeeding. Children who are exclusively breastfed have a lower frequency of illness than those who are not exclusively breastfed. (Heru Suwardianto, 2017) Babies who are not given exclusive breastfeeding will be more susceptible to disease, this is because babies do not get an antibody substance called sIgA (secretory immunoglobulin A) which can help babies fight bacteria and viruses contained in breast milk. (Haryono & Sulis, 2014) Mothers who do not breastfeed

tend to have lumps in the breast so it can be said that mothers who do not give exclusive breastfeeding and have a short duration of breastfeeding will be more susceptible to breast cancer (Riswan & Munawarah, 2018).

Relationship between Perception of Mother's Seriousness with Exclusive Breastfeeding Behavior

The results of the study of mothers who did not give exclusive breastfeeding with a perception of seriousness were less than those of mothers who had a good perception of seriousness. Statistically, this variable has a p-value of 0.000 meaning that there is a relationship between the perception of the mother's seriousness with exclusive breastfeeding behavior, as is the case with research conducted by Palupi Kusuma, Prista Sari, and Nurhidayah (2015) which states that in preventing disease or in seeking treatment there is a relationship between perceived seriousness. With breastfeeding behavior to mothers. (Palupi Kusuma et al., 2015) Meanwhile, research conducted by Nabilla (2016) stated whether there was a relationship between perceived seriousness and exclusive breastfeeding behavior. (Nabilla, 2016) From the research findings, the perception of maternal seriousness depends on the mother's view of the perception of vulnerability, if the mother feels that she is not vulnerable then the mother will not feel the disease is serious, besides that seriousness arises from the mother's view of the size of a disease. Perception of seriousness is the severity that arises can be obtained from the information obtained and knowledge about the recommended behavior. (Priyoto, 2020)

Based on interviews conducted with 5 mothers, 4 people said that malnutrition did not affect on the child's immune system. And mentions that lack of nutrition does not necessarily make children sick easily. On the other hand, 2 people stated that malnutrition could not affect children's intelligence. The nutritional status of children is influenced by the health status of children, while the health status of children is influenced by infectious diseases which indirectly affect the development of children, including children's intelligence. (Rohimah et al., 2015) Children with good health status will be smarter when compared to children who have less nutritional status, this can prove that nutritional status in children can affect children's intelligence. (Nunuk Sri Lestari, 2016)

Relationship of Mother's Benefit Perception with Exclusive Breastfeeding Behavior

The percentage of mothers who do not give exclusive breastfeeding with a perception of benefits is greater than mothers who have a good perception of benefits, the statistical results of this variable have a p-value of 0.001 which means that there is a relationship between perceptions of mother's benefits with exclusive breastfeeding behavior. The results of interviews conducted on 5 mothers and 3 people stated that they did not believe that breastfeeding could be useful as a natural family planning program and could maintain a pregnancy distance because from the first to the last child did not give exclusive breastfeeding. Exclusive breastfeeding can keep the pregnancy distance and can be a mother's natural family planning because it can inhibit the ovulation process so that it can keep the pregnancy distance between the mother. (Hamid et al., 2020) However, the distance between pregnancies is also influenced by other factors such as age, education level, and economic status, mothers with age > 35

years have a short distance. (Laili, 2018) Mothers with a good perception of benefits tend to have plans to give exclusive breastfeeding, so it can be said that there is a relationship between perceived benefits and the mother's plan to give exclusive breastfeeding. (Ayu Utami et al., 2017) In the research findings, there are working mothers who understand the benefits of breastfeeding but choose not to breastfeed because they have to choose a job with breastfeeding.

Relationship of Perception of Maternal Barriers to Exclusive Breastfeeding Behavior

Mothers who do not give exclusive breastfeeding with a perception of high barriers have a greater percentage than mothers who have perceptions of low barriers, the statistical results of this variable have a p-value of 0.000 meaning that there is a relationship between perceptions of maternal barriers and exclusive breastfeeding behavior. Interviews conducted on 5 mothers said that cracked breasts were a mother's obstacle in breastfeeding, and the lack of milk production made the mother worried that she could not give milk to her child. If the barriers to behavior are much greater than the convenience obtained, likely, the person will not perform the recommended behavior. (Priyoto, 2020). If the mother works, it is possible that she will not give exclusive breastfeeding to her child, because the lack of time between the mother and the child allows the mother not to breastfeed. (Abdullah & Ayubi, 2013) Monalisa's research (2018) states that there is a relationship between perceived barriers to student plans to carry out the Exclusive Breastfeeding program. (Monalisa, 2020).

Relationship of Mother's Cues to Action with Exclusive Breastfeeding Behavior

Mothers who do not give Exclusive Breastfeeding with signs to act less have a greater number than mothers who have signs to act well, the statistical results of this variable have a p-value of 0.000 which means that there is a relationship between cues to act by mothers with exclusive breastfeeding behavior. Interviews conducted on breastfeeding mothers initially decided to choose formula milk from seeing information or advertisements on TV and then decided for them selves to choose the right formula milk. Based on information from 5 mothers, 3 of them stated that the counseling and supervision carried out by health workers at the puskesmas was not optimal. This is the same as research conducted by Nabilla (2016) which says that there is a relationship between Cues to Action (cues to action) and exclusive breastfeeding behavior. (Nabilla, 2016) Health workers also play a very big role in influencing mothers to make decisions. (Sabati & Nuryanto, 2015)

The Influence of Perceived Seriousness, Perception of Barriers and Cues to Action for Mothers with Exclusive Breastfeeding Behavior

From the research conducted, there is a relationship between perceived seriousness, perceived barriers, and cues to act with exclusive breastfeeding behavior. The higher the perception of seriousness that a person feels as a result of an illness that arises because of not performing healthy behaviors, it is possible for a person to choose the recommended behavior. The perception of seriousness has an impact that is felt by mothers if they do not do exclusive breastfeeding such as the seriousness of breast cancer,

malnutrition, diarrhea, etc. (Ginting, 2019) The results of the multivariate test show that the perception of seriousness has the largest exp B, which is 6.481 of these results stating respondents with a perception of seriousness is less risky not exclusive breastfeeding is 6.481 times greater than respondents who have a good perception of seriousness. To increase the coverage of exclusive breastfeeding, it is necessary to educate respondents regularly, not only during classes for pregnant women, and to strengthen it through the support of community leaders.

A mother's experience in exclusive breastfeeding and a good mother's knowledge greatly affect the mother's perception in making breastfeeding decisions. (Fitriani & Muftililah, 2018) If someone has a good perception of vulnerability, it can pose a threat to the seriousness of a disease that determines a person to behave healthily. (Kika Dwi Kurniawati, 2020) The perception of seriousness, the perception of obstacles, and cues to act affect the mother's decision to carry out exclusive breastfeeding behavior. The role of health workers and cadres is a very influential factor in the mother's decision to give exclusive breastfeeding in the cues to action variable. Cadres and health workers must always motivate and provide emotional support to mothers to breastfeed. (Windari, 2017)

LIMITATION OF THE STUDY

The limitation of this study is the theory of the influence of the Health Belief Model (HBM) which has an impact on exclusive breastfeeding behavior in toddlers.

CONCLUSIONS AND SUGGESTIONS

As shown in the results that the perception of seriousness greatly influences the behavior of exclusive breastfeeding. Breastfeeding mothers do not have confidence in the severity of a disease that arises from not breastfeeding. It is recommended that health workers provide education to breastfeeding mothers with the peer education method in community associations such as in recitations or social gatherings. In addition, researchers recommend approaching and monitoring breastfeeding mothers by making home visits.

ETHICAL CONSIDERATIONS

This research already approved by commite ethic FKM UNDIP.

Funding Statement

The authors did not receive support from any organization for the submitted work.

Conflict of Interest Statement

The authors declared that no potential conflicts of interest with respect to the authorship and publication of this article.

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